	Eastern Distric	et of North Carolina
TIMOTHY HI	NES)
Plaintiff		
٧.) Civil Action No.
CORRECT CARE SOLUT	ΓΙΟΝS, LLC, et al.)
Defendant)
	SÚMMONS II	N A CIVIL ACTION
To: (Defendant's name and address)		national, Inc. (Reg Agent)
A lawsuit has been file	d against you.	
are the United States or a United P. 12 (a)(2) or (3) — you must	ed States agency, or an off serve on the plaintiff an a	
If you fail to respond, You also must file your answe		be entered against you for the relief demanded in the complaint.
		CLERK OF COURT
Data		
Date:	-	Signature of Clerk or Deputy Clerk

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

This summons for (na	me of individual and title, if any)		
ceived by me on (date)	•		
☐ I personally serve	d the summons on the individual a	t (place)	
		on (date)	; or
	s at the individual's residence or us	sual place of abode with (name)	
		f suitable age and discretion who resid	
on (date)	, and mailed a copy to t	he individual's last known address; or	
			who is
designated by law to	accept service of process on beha		
		on (date)	; or
	nmons unexecuted because		; or
☐ Other (specify):	***************************************		
(2 35)			
My fees are \$	for travel and \$	for services, for a total of \$	0.00
I declare under pena	lty of perjury that this information	is true.	
	Manual Assessment Control of Cont	Server's signature	
	ALAA COTTO TO	Printed name and title	
		Server's address	* A Landau Control of the Control of

Eastern Distri	ict of North Carolina
TIMOTHY HINES)
Plaintiff	
v. CORRECT CARE SOLUTIONS, LLC, et al.) Civil Action No.)
Defendant	,
SUMMONS I	IN A CIVIL ACTION
To: (Defendant's name and address) Edward J. McMahon Sheriff, New Hanover C 3950 Juvenile Center R Castle Hayne, NC 2842	oad
A lawsuit has been filed against you.	
are the United States or a United States agency, or an of P 12 (a)(2) or (3) — you must serve on the plaintiff an	
If you fail to respond, judgment by default will You also must file your answer or motion with the cour	be entered against you for the relief demanded in the complaint.
	CLERK OF COURT
Datas	
Date:	Signature of Clerk or Deputy Clerk

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	This summons for (name	ne of individual and title, if any)		
was rec	eived by me on (date)	,		
	☐ I personally served	the summons on the individual	at (place)	
	•		on (date)	; or
		at the individual's residence or u	usual place of abode with (name)	
		, a person	of suitable age and discretion who resid	les there,
	on (date)	, and mailed a copy to	the individual's last known address; or	
	☐ I served the summo	ons on (name of individual)		, who is
	designated by law to a	accept service of process on beh		
			on (date)	; or
	☐ I returned the sumr	nons unexecuted because		; or
	☐ Other (specify):	*****		
	My fees are \$	for travel and \$	for services, for a total of \$	0.00
	T 1 1		a is tma	
	I declare under penalt	y of perjury that this information	is true.	
Date:	The state of the s	**************************************	Server's signature	
		The state of the s	Printed name and title	
		waterpay day,	Server's address	

	Eastern Distric	et of North Carolina
TIMOTHY HI	NES)
Plaintiff)
٧,) Civil Action No.
CORRECT CARE SOLUT	TIONS, LLC, et al.))
Defendant)
	SUMMONS I	N A CIVIL ACTION
To: (Defendant's name and address)	James Pence Coastal Family Practice 2209 Delaney Road Wilmington, NC 28403	
A lawsuit has been file	d against you.	
are the United States or a United P. 12 (a)(2) or (3) — you must	ed States agency, or an off serve on the plaintiff an a	
If you fail to respond, You also must file your answe		be entered against you for the relief demanded in the complaint.
		CLERK OF COURT
Date:		
Date:		Signature of Clerk or Deputy Clerk

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

			····
cerved by me on (date)	*		
☐ I personally served	the summons on the individual at	t (place)	
•		on (date)	; or
☐ I left the summons a	at the individual's residence or us	sual place of abode with (name)	
		f suitable age and discretion who resid	les there,
on (date)	, and mailed a copy to the	he individual's last known address; or	
☐ I served the summo	ns on (name of individual)		, who
designated by law to a	ccept service of process on behal		-
		on (date)	; or
	nons unexecuted because		;
Other (specify):	and the control of th		
Other (spectyy).			
My fees are \$	for travel and \$	for services, for a total of \$	0.00
	**************************************		-,-,-
I declare under penalty	y of perjury that this information	is true.	
I declare under penalty	y of perjury that this information	is true.	
I declare under penalt	y of perjury that this information		
I declare under penalt	y of perjury that this information	is true. Server's signature	
I declare under penalt	y of perjury that this information	Server's signature	
I declare under penalt	y of perjury that this information		
I declare under penalt	y of perjury that this information	Server's signature	

	Eastern Distri	ct of North Carolina
TIMOTHY HI	NES)
Plaintiff)
v.		Civil Action No.
CORRECT CARE SOLUT	ΓΙΟΝS, LLC, et al.)
Defendant)
	SUMMONS I	N A CIVIL ACTION
To: (Defendant's name and address)	Marty Adams Captain, New Hanover C 3950 Juvenile Center Ro Castle Hayne, NC 28429	pad
A lawsuit has been file	d against you.	
are the United States or a United P. 12 (a)(2) or (3) — you must	ed States agency, or an of serve on the plaintiff an a	
If you fail to respond, You also must file your answer	judgment by default will r or motion with the court	be entered against you for the relief demanded in the complaint.
		CLERK OF COURT
Date:		
Date.	-	Signature of Clerk or Deputy Clerk

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

	This summons for (nam	e of individual and title, if	any)			
as rec	ceived by me on (date)		▼			
	☐ I personally served	the summons on the i	ndividual at <i>(pl</i>	ace)		
	•			on (date)		
				place of abode with (name)		
				itable age and discretion who resid	des there,	
	on (date)	, and mailed	a copy to the i	ndividual's last known address; or		
	☐ I served the summo		_			, who is
	designated by law to a	ccept service of proce				
				on (date)	; or	
	☐ I returned the summ				***************************************	; or
	Other (specify):					
	My fees are \$	for travel an	ad \$	for services, for a total of \$	0.0	00
	I declare under penalty	v of periury that this i	nformation is t	rue.		
	r doctare under penare	or porjury mas vines.				
Date:						
Duit.				Server's signature		
				Printed name and title		
			- Land Control of the	Server's address		
				Derver a unuress		

	Eastern District of 1	North Carolina
TIMOTHY HI	NES)	
Plaintiff	<u> </u>	
ν.)	Civil Action No.
CORRECT CARE SOLUT	TIONS, LLC, et al.	
Defendant)	
	SUMMONS IN A C	CIVIL ACTION
To: (Defendant's name and address)	New Hanover County, North C c/o Chairman Jason R. Thom 606 Sunnyvale Drive Wilmington, NC 28412	Carolina oson
A lawsuit has been file		(not counting the day you received it) — or 60 days if you
are the United States or a United P. 12 (a)(2) or (3) — you must	ed States agency, or an officer of serve on the plaintiff an answe	or employee of the United States described in Fed. R. Civ. r to the attached complaint or a motion under Rule 12 of must be served on the plaintiff or plaintiff's attorney,
If you fail to respond, You also must file your answe	judgment by default will be ent r or motion with the court.	ered against you for the relief demanded in the complaint.
		CLERK OF COURT
D. 4-2		
Date:	A A A A A A A A A A A A A A A A A A A	Signature of Clerk or Deputy Clerk

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

This summons for (name of individual and title, if any)		
ceived by me on (date)	,		
☐ I personally serv	ed the summons on the individual at	(place)	
		on (data)	
	ns at the individual's residence or us		
	, a person of	suitable age and discretion who resid	les there,
on (date)	, and mailed a copy to the	e individual's last known address; or	
☐ I served the sum	mons on (name of individual)		, who i
designated by law t	to accept service of process on behal		
		on (date)	; or
			; 01
☐ Other (specify):			
	•		
My fees are \$	for travel and \$	for services, for a total of \$	0.00
Y 4 1 1	alter of manipums that this information	io truta	
I declare under pen	alty of perjury that this information	s irue.	
***************************************		Server's signature	
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Printed name and title	
	programme and the contract of		
		Server's address	

Eastern Distric	ct of North Carolina
TIMOTHY HINES)
Plaintiff)
ν.) Civil Action No.
CORRECT CARE SOLUTIONS, LLC, et al.)
Defendant)
SUMMONS II	N A CIVIL ACTION
To: (Defendant's name and address) George Benya 800 Joseph Willetts Drive Winnabow, NC 28479	9
A lawsuit has been filed against you.	
are the United States or a United States agency, or an off P. 12 (a)(2) or (3) — you must serve on the plaintiff an a	
If you fail to respond, judgment by default will be You also must file your answer or motion with the court	be entered against you for the relief demanded in the complaint.
	CLERK OF COURT
Date:	
Duw.	Signature of Clerk or Deputy Clerk

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

This summons for (name	of individual and title, if any)		
received by me on (date)	•		
☐ I personally served the	he summons on the individual at	(place)	
•			
	t the individual's residence or us		
	·	f suitable age and discretion who resid	les there,
on (date)		ne individual's last known address; or	
☐ I served the summon	s on (name of individual)		, who is
designated by law to ac	cept service of process on behal		
		on (date)	_ ; or
			; or
☐ Other (specify):			
My fees are \$	for travel and \$	for services, for a total of \$	0.00
I declare under penalty	of perjury that this information	is true.	
***************************************		Server's signature	
		Server's signature	
		Printed name and title	
	**************************************	Server's address	and december of the second

Eastern District of North Carolina					
TIMOTHY HI	NES)			
Plaintiff))			
ν.		Civil Action No.			
CORRECT CARE SOLUTIONS, LLC, et al.)			
Defendant)			
SUMMONS IN A CIVIL ACTION					
To: (Defendant's name and address)	United States of America c/o George E.B. Holding, t 310 New Bern Avenue Raleigh, NC 27601	J.S. Atty, E.D.N.C.			
A lawsuit has been file	d against you.				
Within 21 days after service of this summons on you (not counting the day you received it) — or 60 days if you are the United States or a United States agency, or an officer or employee of the United States described in Fed. R. Civ. P. 12 (a)(2) or (3) — you must serve on the plaintiff an answer to the attached complaint or a motion under Rule 12 of the Federal Rules of Civil Procedure. The answer or motion must be served on the plaintiff or plaintiff's attorney, whose name and address are: Keith L. Edmiston The Ritchie Law Firm, P.C. 607 Market Street, Ste. 1100 Knoxville, TN 37902					
If you fail to respond, You also must file your answer	judgment by default will be r or motion with the court.	entered against you for the relief demanded in the complaint.			
		CLERK OF COURT			
Deter					
Date:		Signature of Clerk or Deputy Clerk			

PROOF OF SERVICE

(This section should not be filed with the court unless required by Fed. R. Civ. P. 4 (1))

This summons for (no	ame of individual and title, if any)		
ceived by me on (date)			
☐ I personally serve	d the summons on the individual a	it (place)	
		on (date)	; or
	s at the individual's residence or u	sual place of abode with (name)	
		of suitable age and discretion who resid	les there,
on (date)	, and mailed a copy to t	he individual's last known address; or	
☐ I served the sumn	nons on (name of individual)		, who i
designated by law to	accept service of process on beha		
		on (date)	; or
☐ I returned the sun	nmons unexecuted because		; 01
☐ Other (specify):			
(-)			
My fees are \$	for travel and \$	for services, for a total of \$	0.00
I declare under pena	Ity of perjury that this information	is true.	
	•	Server's signature	
	19-11-11-11-11-11-11-11-11-11-11-11-11-1	Printed name and title	
	application in the annual file and a second and an annual file and a second an	Server's address	